

Ann B. Johnsen Memorial Masters Swim Meet

Saturday, November 6, 2021



Hosted by Talbot Masters at the YMCA of Talbot County

Sanctioned by the Maryland LMSC for USMS, Inc.

FACILITY

Five (5) lane 25-yard competition pool with a secondary warm pool for warm-up /warm-down. Swimmers will compete in five (5) lanes; electronic timing system and scoreboard display. NO DIVING permitted during warm-up except in designated one-way sprint lane(s). Times from this competition will be eligible for world record, USMS record, and Top 10 consideration. Address: 202 Peachblossom Rd., Easton, MD 21601

The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 106.2.1.

ELIGIBILITY

Open to all USMS-registered swimmers age 18 and older. All advance entries must be done online via Club Assistant. The meet entry link is available at mdusms.org For deck entries, a legible copy of your current 2021 USMS registration card MUST be brought to the facility at the designated window.

SCHEDULE

Warm-Up: 10:00 AM – 10:55 AM • Meet Starts: 11:00 AM. For any individuals deck entering, you must arrive at the facility at 9:30 AM – and you must notify the Meet Director of your intent to deck enter to coordinate collection of information required for entry into the facility. Notification must be made at least one day prior to meet start.

Relay entries may be emailed in advance to marko@usms.org. Relay entries may be created on deck but with the following deadlines: All cards are due at 10:30 AM.

ENTRIES

Swimmers are permitted to enter a maximum of three (3) individual events and maximum two (2) relays (one medley and one freestyle).

EVENT SEEDING

Events will be contested in heats, slowest to fastest. All events will be pre-seeded except for deck entries. Deck entries will be slotted into available lanes where possible or in a new heat to be created, if required. Men and women will compete under the same event number and will be seeded by time without regard to gender. Relays will be seeded randomly and may include all women, all men, or exactly two men and two women.

ENTRY FEES

Meets are \$25.00 to all registered Maryland LMSC Swimmers who register online. Registered swimmers from other USMS LMSC's are welcome for a fee of \$30.00 with online entry.

Deck entry fee: \$30.00 for Maryland LMSC swimmers (\$25.00 Fee for ages 65+). \$35.00 for non Maryland LMSC swimmers. Deck entry is payable by cash or check made payable to: Maryland LMSC.

These fees will be collected at the registration table.

ENTRY DEADLINE

On-line entry deadline, via Club Assistant, is on Thursday, November 11, 2021. Check details for deadline at mdusms.org Relay entries may be emailed in advance to marko@usms.org. Relay entries may be created on deck but with the following deadlines: All cards are due at 10:30 AM.

Paper/mailed entries will not be accepted.

QUESTIONS

Direct inquiries to Mark Oliphant marko@usms.org

ORDER OF EVENTS

1. Mixed 200 yd. Individual Medley
2. Mixed 50 yd. Freestyle
3. Mixed 100 yd. Breaststroke
4. Mixed 200 yd. Freestyle
5. Mixed 100 yd. Backstroke
6. Mixed 50 yd. Butterfly
7. 200 yd. Medley Relay
8. Mixed 100 yd. Individual Medley
9. Mixed 200 yd. Breaststroke
10. Mixed 50 yd. Backstroke
11. Mixed 100 yd. Butterfly
12. Mixed 50 yd. Breaststroke
13. Mixed 100 yd. Freestyle
14. 200 yd. Freestyle Relay

LIABILITY RELEASE: "I, undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all risks inherent in Masters Swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEARBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUB HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS."

SIGNATURE _____ DATE _____

PRINT NAME _____ GENDER (circle one) M F

DATE OF BIRTH ____/____/____ AGE ____ (as of 12/31/2021) CLUB _____

DAY TEL (_____) _____ - _____ EVE TEL (_____) _____ - _____

EMAIL ADDRESS _____



PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

- I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
- I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
- I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
- I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19, or other viral or bacterial infection, while participating in any of the Events, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I agree that if I have a fever, cough, feel short of breath, have any other symptoms, have knowingly been exposed to a communicable disease such as COVID-19 or have traveled to or from a highly impacted area, I will not attend an Event for at least two weeks after exposure or symptoms have subsided or I have returned from a highly impacted area. In addition, if I discover I have been exposed to a suspected or positive case of COVID-19 or have tested positive for COVID-19, I will notify the USMS coach or club administrator immediately.
- I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
- I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle) M F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip				
Signature of Participant			Date Signed	